## **CLAIMS ONLY**

SERIAL NO. FILING DATE

APPLICANT(S)

CLAIMS

|                         | AS FILED   |              | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
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| TOTAL                   |            |              |                        | -    |                        |      |
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| DEP.<br>TOTAL<br>CLAIMS | $\nu$      |              |                        |      |                        |      |

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| TOTAL<br>CLAIMS | <u> </u>   |  |  | <u> </u>   | L  |  |  |  |

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS

FORM PTO-2022 (1-98)

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